



**Research Dynamics**  
**Consulting Group, Ltd.**  
 1250 Pittsford Victor Road  
 Bldg. 100 Suite 110  
 Pittsford, NY 14534  
 tel: (585) 381-1350  
 fax: (585) 381-4032  
 Fed ID: 16-1444462

## PRODUCT ORDER FORM

Company:		<b>PURCHASE ORDER TERMS:</b> Purchase Orders from companies only will be accepted under the following conditions: Purchase Orders must be printed on company letterhead or equivalent form. Signature of authorized purchaser is required. Purchase Order will allow product order to be placed in system. Shipment of product(s) will occur after receipt of payment.  <b>CANCELLATION &amp; RETURN POLICY:</b> Due to the proprietary nature of all products, Research Dynamics has a strict policy of NO RETURNS. Orders cancelled prior to shipping are subject to a 15% cancellation fee. Prices and availability subject to change without notice.
Attention:		
Address:		
Address:		
City, State, Zip:		
Telephone:		
Fax:		
E-mail Address:		

How did you hear about us/our products? <i>Please select all that apply.</i>	<input type="checkbox"/> Research Dynamics' Training Course	<input type="checkbox"/> Website	<input type="checkbox"/> Fax	<input type="checkbox"/> Email	<input type="checkbox"/> Direct Mail	<input type="checkbox"/> Referral
---	---	----------------------------------	------------------------------	--------------------------------	--------------------------------------	-----------------------------------

Description	Qty	Price Each	Product Total
<b>SOP Template Kit version 5.0(CD Version)</b>		\$645.00	
<b>Upgraded SOP Template Kit (CD Version)</b>		\$395.00	
<b>Good Clinical Practices for the Clinical Investigator</b>		\$99.00	
<b>Clinical Research Coordinator (CRC) Activity Guide</b>		\$69.00	
<b>Clinical Research Associate (CRA) Activity Guide</b>		\$69.00	
* <b>Quantity Discounts Available for all Products *</b>			<b>SUBTOTAL:</b>

Please select shipping & handling preference: IF NO PREFERENCE IS SELECTED, WE WILL USE "STANDARD"	<input type="checkbox"/> Standard mail - \$14.95 (4-8 business days)	<input type="checkbox"/> Express - \$19.95 (2-3 business days)	<input type="checkbox"/> Overnight - \$39.95 (by 12:30 next day)
---	---	---	---

Enclose Check, payable to: <b>RESEARCH DYNAMICS CONSULTING GROUP, LTD.</b>	PRODUCTS SUBTOTAL	
or pay by Credit Card: <b>MASTERCARD VISA DISCOVER AMERICAN EXPRESS</b>	SHIPPING & HANDLING TOTAL	
Credit Card Number: _____ Exp. date: _____	ORDER SUBTOTAL	
Cardholder Name (print): _____	NYS ORDERS ADD SALES TAX!	
Cardholder Signature: _____	<b>ORDER TOTAL</b>	

**www.resdyncg.com**

**Fax or mail this completed form with your check, credit card information, or purchase order to the address above. Orders are subject to credit approval and all terms and conditions.**